



**Department of the Treasury**  
*Federal Law Enforcement Agencies*  
**PROCESS RECEIPT AND RETURN**

PLAINTIFF United States of America		COURT CASE NUMBER 18-6028-CV-SJ-ODS	
DEFENDANT Real Property at 6525 E. Cave Creek Road, Unit 15, Cave Creek, AZ		TYPE OF PROCESS Post & Walk	
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE		
AT	ADDRESS (Street or RFD, Apartment No., City, State and Zip Code) 6525 E. Cave Creek Road, Unit 15, Cave Creek, Arizona 85331		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		NUMBER OF PROCESS TO BE SERVED IN THIS CASE.	3
Stacey Perkins Rock United States Attorney's Office 400 E. 9th Street, Fifth Floor Kansas City, MO 64106		NUMBER OF PARTIES TO BE SERVED IN THIS CASE.	3
		CHECK BOX IF SERVICE IS ON USA	<input type="checkbox"/>
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Includes Business and Alternate Addresses, Telephone Numbers, and Estimated Times Available For Service):  Please post Complaint, Notice of Complaint, and Amended Restraining Order on the real property. Please photograph notice posted on door of residence. Thank you.			
Signature of Attorney or other Originator requesting service on behalf of <i>Stacey Perkins Rock</i>		[ <input checked="" type="checkbox"/> ] PLAINTIFF [ <input type="checkbox"/> ] DEFENDANT	TELEPHONE NO. <i>816 426-4275</i> DATE <i>4/2/18</i>
SIGNATURE AND DATE OF PERSON ACCEPTING PROCESS: <i>S. Greg Howard</i> 4/2/2018			
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the total number of process indicated. 3	District of Origin No.	District to Serve No.	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER <i>S. Greg Howard</i> DATE 4/3/2018
I HEREBY CERTIFY AND RETURN THAT I <input type="checkbox"/> PERSONALLY SERVED. <input type="checkbox"/> HAVE LEGAL EVIDENCE OF SERVICE. <input checked="" type="checkbox"/> HAVE EXECUTED AS SHOWN IN REMARKS, THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, CORPORATION, ETC., AT THE ADDRESS SHOWN ABOVE OR ON THE ADDRESS INSERTED BELOW.			
<input type="checkbox"/> I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC. NAMED ABOVE.			
NAME & TITLE OF INDIVIDUAL SERVED IF NOT SHOWN ABOVE:		<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above)		DATE OF SERVICE 4/2/2018	TIME OF SERVICE 4:40 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM
		SIGNATURE, TITLE AND TREASURY AGENCY <i>S. Greg Howard</i> Special Agent Greg Howard, IRS-CI	
REMARKS: IRS-CI Special Agent Greg Howard posted the Complaint, Notice of Complaint, and Amended Restraining Order on the front door of the identified real property as stated in the Special Instructions.			

TD F 90-22.48 (6/96)

